

**AUGUST 2004 MONTHLY REPORT** 

# Health Insurance Risk Sharing Plan (HIRSP) August 2004 Monthly Statistics

	August-04	February-04
BANK SUMMARY		
CHECKWRITE	\$5,305,242.97	\$5,697,530.60
BOOK BALANCE (US Bank & State General Account)	\$43,792,481.00	\$44,736,354.00
ENROLLMENT		
PLAN 1A	8,233	8,061
PLAN 1B	8,386	7,866
PLAN 2	1,746	1,742
TOTAL	18,365	17,669
NEW APPLICATIONS RECEIVED	444	522
CLAIMS		
CLAIMS PROCESSED	91,442	101,231
AVERAGE PROCESSING DAYS	13	14
CLAIM INVENTORY - OVER 30 DAYS OLD	989	2,046
CLAIM INVENTORY - TOTAL	10,827	8,050
CLAIMS DENIED (Non-PBM)	9,070	15,854
CLAIMS DENIED (PBM)	8,297	8,354
CLAIM ACCURACY PERFORMANCE	100.00%	99.65%
CUSTOMER SERVICE - HIRSP		
NUMBER OF CALLS RECEIVED	9,174	10,435
PERCENTAGE OF CALLS ANSWERED	94.4%	89.5%
WRITTEN CORRESPONDENCE - RECEIVED	606	459
WRITTEN CORRESPONDENCE - COMPLETED	594	464
WRITTEN CORRESPONDENCE - INVENTORY	30	27
AVERAGE HOLD TIME FOR TELEPHONE CALLS	2.42	4.43

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## Wisconsin Health Insurance Risk-Sharing Plan Breakdown of Incurred Claims and Earned Premium by Quarter and Plan

		1	Q03		
_	Total D	ollars		Per Member	Per Month
	Incurred	Earned	Loss	Incurred	Earned
Plan	Claims	Premium	Ratio	Claims	Premium
Plan 1A	\$16,980,428	\$9,643,975	176.1%	\$683.76	\$388.34
Plan 1B	6,901,173	6,382,184	108.1%	360.88	333.74
Plan 2	3,535,102	1,759,919	200.9%	683.51	340.28
Total	\$27,416,703	\$17,786,078	154.1%	\$558.06	\$362.03
			2Q03		
_	Total D			Per Member	
	Incurred	Earned	Loss	Incurred	Earned
Plan	Claims	Premium	Ratio	Claims	Premium
Plan 1A	\$20,064,644	\$9,858,100	203.5%	\$787.59	\$386.96
Plan 1B	6,971,571	6,664,640	104.6%	348.16	332.83
Plan 2	4,031,084	1,796,687	224.4%	767.68	342.16
Total	\$31,067,299	\$18,319,427	169.6%	\$612.15	\$360.97
		3	Q03		
_	Total D	ollars		Per Member	
	Incurred	Earned	Loss	Incurred	Earned
Plan	Claims	Premium	Ratio	Claims	Premium
Plan 1A	\$21,679,032	\$10,846,522	199.9%	\$850.69	\$425.62
Plan 1B	7,815,938	7,649,161	102.2%	374.40	366.41
Plan 2	4,264,333	2,062,401	206.8%	819.75	396.46
Total	\$33,759,303	\$20,558,083	164.2%	\$654.73	\$398.71
			Q03		
_	Total D			Per Member	Per Month
	Incurred	Earned	Loss	Incurred	Earned
Plan	Claims	Premium	Ratio	Claims	Premium
Plan 1A	\$23,885,622	\$10,825,220	220.6%	\$938.61	\$425.39
Plan 1B	10,110,688	8,013,666	126.2%	460.23	364.77
Plan 2	4,527,316	2,062,818	219.5%	869.63	396.24
Total	\$38,523,627	\$20,901,704	184.3%	\$732.07	\$397.20
		1	Q04		
_	Total D	ollars		Per Member	Per Month
	Incurred	Earned	Loss	Incurred	Earned
Plan	Claims	Premium	Ratio	Claims	Premium
Plan 1A	\$20,744,177	\$10,273,986	201.9%	\$845.36	\$418.68
Plan 1B	10,114,877	8,769,984	115.3%	420.45	364.55
Plan 2	4,225,154	2,060,924	205.0%	809.26	394.74
Total	\$35,084,209	\$21,104,894	166.2%	\$651.92	\$392.16

NOTES: Loss Ratio = Incurred Claims / Earned Premiums

Earned Premium includes Premium Subsidies

Incurred Claims include Provider Contributions

Administrative Expenses are not included in this exhibit

Incurred Claims and Earned Premiums are updated quarterly and restated to reflect

the most current information available as of June  $30,\,2004$ 

### Wisconsin Health Insurance Risk Sharing Plan Financial Report Notes For the Period Ending August 31, 2004

These monthly reports do not include the June 30, 2002 CAFR<sup>1</sup> (Combined Annual Financial Report) adjustments. When these adjustments are available, the monthly report will reflect these changes. Previously issued monthly reports will not be reissued but the financial statement notes for the current month will summarize the CAFR adjustment.

#### 1) Policyholder Retained Earnings, End of Period (page 3 & 9)

The policyholder retained earnings include both assigned and the unassigned surplus (see Interim Reconciliation page 6 and 12 for the breakdown).

#### 2) Other Receivables (page 7 & 13)

Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.

#### 3) Losses Paid or Approved for Payment (page 3 & 9)

Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.

<sup>&</sup>lt;sup>1</sup> CAFR is the State of Wisconsin annual financial report published by DOA (Dept of Admin) and prepared in accordance with GASB (Governmental Accounting Standards Board).

#### Wisconsin Health Insurance Risk Sharing Plan for the Period Ended August 31, 2004 Fiscal Year 2005

	j	U	Inaudited Sta	atement of Re	evenues, Exp	enses, and Ch	nanges in Reta	ined Earning	S				
Operating Revenues	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
Gross Premiums	7,872,385	8,059,267	-	-	-	-	-	-	-	-	-	-	15,931,652
Premium Subsidized Net Premium Revenues	(332,487) 7,539,898	(337,487) 7,721,780	-	-	-	-	-	-	-	-	-	-	(669,974) 15,261,678
Provider Contribution	4,513,059	3,123,273											7,636,332
Insurer Assessments	2,691,362	2,691,362	-	-	-		-	-	-	-		-	5,382,724
<b>Total Operating Revenues</b>	14,744,319	13,536,415											28,280,734
Operating Expenses  Medical Losses:													
Losses Paid or Approved for Payment (3)	10,959,459	8,270,511	_	_			_			_			19,229,970
Increase (Decrease) in Unpaid Losses	1,307,286	(13,021)	_	_	_	_	_	_	_	_	_	_	1,294,265
Deductible Subsidy Paid	56,140	35,944	_	_	-	-	_	_	-	_	_	_	92,084
Total Medical Losses	12,322,885	8,293,434	-	-	-	-	-	-	-	-	-	-	20,616,319
Pharmacy Losses:													
Losses Paid or Approved for Payment	3,455,297	5,261,686	-	-	_	-	-	-	_	-	_	-	8,716,983
Increase (Decrease) in Unpaid Losses	553,645	(1,412,550)	-	-	-	-	-	-	-	-	-	-	(858,905)
Drug Rebates	(91,621)	(136,238)	-	-	-	-	-	-	-	-	-	-	(227,859)
Subsidy - Coinsurance Out-of-Pocket Max	19,025	20,562	-	-	-	-	-	-	-	-	-	-	39,587
Total Pharmacy Losses	3,936,346	3,733,460	-	-	-	-	-	-	-	-	-	-	7,669,806
Total Losses	16,259,231	12,026,894	_	-	-	-	-	-	-	-	_	-	28,286,125
Loss adjustment expenses	_	_	_	_	_	_	_	_	_	_	_	_	_
Administrative expenses DHFS Admin Fees	38,870	52,788											91,658
			-	-	-	-	-	-	-	-	-	-	
EDS Admin Fees	72,709	71,453	-	-	-	-	-	-	-	-	-	-	144,162
UGS Admin Fees	245,436	239,647	-	-	-	-	-	-	-	-	-	-	485,083
Milliman USA Actuarial Services	10,500	6,857	-	-	-	-	-	-	-	-	-	-	17,357
Other Admin Fees Total Administrative Expenses	12,075 379,590	18,441 389,186											30,516 768,776
•													
Referral fees	8,785	8,798	-	-	-	-	-	-	-	-	-	-	17,583
Total Operating Expenses	16,647,606	12,424,878	-	-	-	-	-	-	-	-	-	-	29,072,484
Net Operating Income (Loss)	(1,903,287)	1,111,537	-	-	-	-	-	-	-	-	-	-	(791,750)
Non-Operating Revenues (Expenses)													
Investment income	40,452	39,550	-	-	-	-	-	-	-	-	-	-	80,002
Total Non-operating Revenues (Expenses)	40,452	39,550	-	-	-	-	-	-	-	-	-	-	80,002
Net Income (Loss)	(1,862,835)	1,151,087	_	_	-	-	_	_	_	_	_	_	(711,748)
Additions to Retained Earnings													
Policyholder Retained Earnings, Beginning of Period	5,379,754	3,408,111			_	_	_	_	_			_	5,379,754
Unfunded Policyholder Subsidies	5,575,754	5,400,111	_	_	_	_	_	-	_	_	_	_	-
Current Earnings	(1,971,643)	718,479	_	_	-	-	-	_	_	-	-	_	(1,253,164)
Retained Earnings, End of Period <sup>(1)</sup>	3,408,111	4,126,590	-	-	-	-	-	-	-	-	-	-	4,126,590
Providers													
Retained Earnings, Beginning of Period	7,184,952	8,187,787	-	-	-	-	-	-	-	-	-	-	7,184,952
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	1,002,835	460,512	-	-	-	-	-	-	-	-	-	-	1,463,347
Retained Earnings, End of Period	8,187,787	8,648,299	-	-	-	-	-	-	•	-	-	-	8,648,299
Insurers													
Retained Earnings, Beginning of Period	4,883,888	4,065,026	-	-	-	-	-	-	-	-	-	-	4,883,888
Premium Subsidy Underpayment Adj.	-		-	-	-	-	-	-	-	-	-	-	-
Current Earnings Retained Earnings, End of Period	(818,862) 4,065,026	28,602 <b>4,093,628</b>	-	-	-	-	-	-	-	-	-	-	(790,260) <b>4,093,628</b>
		4,033,026	-	-	-	-	-	-	-	-	-	-	4,033,028
Unfunded Deductible and Coinsurance Sub Retained Earnings, Beginning of Period	(223,692)	(298,857)											1,928,187
Current Earnings	(223,692)	(56,506)	-	-	-	-	-	-	-	-	-	-	(131,671)
Retained Earnings, End of Period	(298,857)	(355,363)											1,796,516
	(200,001)	(555,556)											.,. 55,510
Total Retained Earnings	15,362,067	16,513,154	-	-	-	-	-	-	-	-	-		18,665,033
104													

#### WISCONSIN HEALTH INSURANCE RISK SHARING PLAN 2005 FISCAL YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSE AS OF AUGUST 31, 2004

MISC REVENUE	JUL 04	AUG	SEP	ост	NOV	DEC	JAN 05	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
								•					-
TOTAL MISC REVENUE	-	-	-	-	-	-	-	-	-	-	-	-	-

													YEAR TO DATE
MISC ADMIN EXP	JUL 04	AUG	SEP	OCT	NOV	DEC	JAN 05	FEB	MAR	APR	MAY	JUN	TOTAL
Bank Service Charge													-
Postage	9,875.07	16,390.65											26,265.72
LAB Audit Fee	1,700.00	1,700.00											3,400.00
Speed Scribe													-
UW Extension													-
NASCHIP	500.00	350.00											850.00
Legal Services													-
													-
													-
													-
													-
													-
													-
													-
													-
TOTAL MISC ADMIN EXP	12,075.07	18,440.65		-	-	-	-	-	-	-	-	-	30,515.72

Prepared 9/17/2004

#### Wisconsin Health Insurance Risk Sharing Plan Fiscal Year 2005 Interim Reconciliation As Of August 31, 2004

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
1. Operating and Administrative Costs under s.149.143(1)													
Medical Losses Paid or Approved for Payment	10,959,459	8,270,511	-	-	-	-	-	-	-	-	-	-	19,229,970
Increase (Decrease) in Unpaid Medical Losses Pharmacy Losses Paid or Approved for Payment	1,307,286 3,455,297	(13,021) 5,261,686	-	-	-	-	-	-	-	-	-	-	1,294,265 8,716,983
Increase (Decrease) in Unpaid Pharmacy Losses	553,645		-	-	-		-	-			-		(858,905)
Drug Rebates	(91,621)	,		_	_	_	_	_	_	_	_		(227,859)
Total Administrative Expenses	388,375	397,984	_	_	_	_	_	_	_	_	_	_	786,359
Loss Adjustment Expense		-	-	_	-	-	-	-	-	-	_	-	-
Total Operating Expense	16,572,441	12,368,372	-	-	-	-	-	-	-	-	-	-	28,940,813
2. Adjustments to Operating and Administrative Costs													
Total Non-operating Revenue (Expense)	40,452	39,550	-	-	-	-	-	-	-	-	-	-	80,002
3. Total Fiscal Year Program Costs to be Split 60% 20% 20%	16,531,989	12,328,822	-	-	-	-	-	-	-	-	-	-	28,860,811
4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Exc	luding Subsic	dy Costs)											
Funding Shares 60% Policyholders	9,919,193	7,397,294											17,316,487
20% Providers	3,306,398	2,465,764	-	-	-	-	-	-	_		-		5,772,162
20% Insurers	3,306,398	2,465,764	-	-	-	-	-	-	-	-	-	-	5,772,162
5. Subsidy Funding Shares													
Premium subsidies	332,487	337,487	-	_	_	-	_	_	_	_	_	_	669,974
Deductible Subsidies	56,140	35,944	-	-	-	-	-	-	-	-	-	-	92,084
Subsidy - coinsurance out-of-pocket Max	19,025	20,562	-	-	-	-	-	-	-	-	-	-	39,587
Total Subsidies	407,652	393,993	-	-	-	-	-	-	-	-	-	-	801,645 *
Subsidy Funding Needed by Source in addition to Section 3 Fund													
Providers	203,826	196,997	-	-	-	-	-	-	-	-	-	-	400,823
Insurers	203,826	196,996	-	-	-	-	-	-	-	-	-	-	400,822
6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Incl													47.040.45-
Policyholders Providers	9,919,193 3,510,224	7,397,294 2,662,761	-	-	-	-	-	-	-	-	-	-	17,316,487 6,172,985
Insurers	3,510,224	2,662,761	-	_	-		-	-			_		6,172,985
7. Non-GPR Revenues by Source Including GPR Subsidies Unde													0,172,004
Policyholders													
Premium	7,539,898	7,721,780	-	-	-	-	-	-	-	-	-	-	15,261,678
Premium and Deductible Subsidies Credited to Policyholders Subtotal	407,652 7.947.550	393,993 8,115,773	-							-			801,645 16,063,323
	,- ,		-	-	-	-	-	-	-	-	-	-	
Providers	4,513,059	3,123,273	-	-	-	-	-	-	-	-	-	-	7,636,332
Insurers	2,691,362	2,691,362	-	-	-	-	-	-	-	-	-		5,382,724
Total	15,151,971	13,930,408	-	-	-	-	-	-	-	-	-	-	29,082,379

#### Wisconsin Health Insurance Risk Sharing Plan Fiscal Year 2005 Interim Reconciliation As Of August 31, 2004

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
8. Interim Estimate of Surplus/(Deficit) Account Balance for FY	2005												
Policyholders Prior Period Surplus / (Deficit)	5,379,754	3,408,111											5,379,754
Filor Feriod Surplus / (Delicit)	5,579,754	3,400,111	-	-	-	-	-	-	-	-	-	-	5,579,754
Premium (Including Premium and Deductible Subsidies)	7,947,550	8,115,773	-	-	-	-	-	-	-	-	-	-	16,063,323
Less Cost	9,919,193	7,397,294	-	-	-	-	-	-	-	-	-	-	17,316,487
Less Unfunded Policyholder Subsidies Monthly Change	(1,971,643)	718,479			-						-	-	(1,253,164)
Worlding Change	(1,571,045)	710,475											(1,233,104)
Ending Surplus / (Deficit)	3,408,111	4,126,590	-	-	-	-	-	-	-	-	-	-	4,126,590
Assigned Surplus to SFY 2005	_	_	_	_	_	_	_	_	_	_	_	_	_
Unassigned Surplus	3,408,111	4,126,590	-	-	-	-	-	-	-	-	-	-	4,126,590
Providers													
Prior Period Surplus / (Deficit)	7,184,952	8,187,787	-	-	-	-	-	-	-	-	-	-	7,184,952
Contribution	4,513,059	3,123,273	_	_	_	_	_	_	_	_	_	_	7,636,332
Less Cost	3,510,224	2,662,761	-	-	-	-	-	-	-	-	-	-	6,172,985
Premium Subsidy Underpayment Adj.			-	-	-	-	-	-	-	-	-	-	<del></del>
Monthly Change	1,002,835	460,512	-	-	-	-	-	-	-	-	-	-	1,463,347
Ending Surplus / (Deficit)	8,187,787	8,648,299	-	-	-	-	-	-	-	-	-	-	8,648,299
Insurers													
Prior Period Surplus / (Deficit)	4,883,888	4,065,026	-	-	-	-	-	-	-	-	-	-	4,883,888
	0.004.000	0.004.000											5 000 704
Assessment Less Cost	2,691,362 3,510,224	2,691,362 2,662,760	-	-	-	-	-	-	-	-	-	-	5,382,724 6,172,984
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(818,862)	28,602	-	-	-	-	-	-	-	-	-	-	(790,260)
Ending Surplus / (Deficit)	4,065,026	4,093,628	-	_	-	-	-	-	-	_	-	_	4,093,628
Unfunded Deductible and Coinsurance Subsidy													
Prior Period Surplus / (Deficit)	(223,692)	(298,857)	-	-	-	-	-	-	-	-	-	-	(223,692)
Monthly Change	(75,165)	(56,506)	-	-	-	-	-	-	-	-	-	-	(131,671)
Ending Surplus / (Deficit)	(298,857)	(355,363)	-	-	-	-	-	-	-	-	-	-	(355,363) *
Total HIRSP Retained Earnings	15,362,067	16,513,154	-	-	-	_	_	_	_	_	-	-	16,513,154
··· ·· · <b>y</b> ·	-, ,	,,											-,,

#### Wisconsin Health Insurance Risk Sharing Plan August 31, 2004 Fiscal Year 2005

#### Unaudited Balance Sheet

Assets	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Cash and Cash Equivalents	44,175,497	43,792,481	_	_	_	_	_	_	_	_	_	_
Other Receivables (2)	39,541	109,277		_	_	_		_	_	_	_	
Drug Rebates Receivable	694,465	830,703	_	_	_	_		_	_	_	_	_
Assessments Receivable	2,781,901	896,397	_	_	_	_	_	_	_	_	_	_
Prepaid Items	57,739	71,349	_	_	_	_	_	_	_	_	_	_
Total Assets	47,749,143	45,700,207	-	-	-	-	-	-	_	_	-	
Linkillidian and Fund Favile.												
Liabilities and Fund Equity Liabilities:												
Unpaid Medical loss Liabilities	16,129,059	16,120,582	_	_	_	_	_	_	_	_	_	_
Unpaid Prescription Drug Loss Liabilities	2,198,353	785,803	_	_	_	_	_	_	_	_	_	_
Unpaid Loss Adjustment Expense	660,000	660,000	_	_	_	_	_	-	-	_	-	-
Unearned Premiums	12,626,044	6,831,139	-	-	-	-	-	-	-	-	-	-
Unearned Assessments	-	3,966,257	-	-	-	-	-	-	-	-	-	-
Accounts Payable and Other Accrued Liabilities	773,620	823,272	-	-	-	-	-	-	-	-	-	-
Total Liabilities	32,387,076	29,187,053	-	-	-	-	-	-	-	-	-	-
Fund Equity:												
Policyholder	3,408,111	4,126,590	_	_	_	_	_	_	_	_	_	_
Providers	8,187,787	8,648,299	_	-	-	-	-	_	_	_	-	-
Insurers	4,065,026	4,093,628	-	_	_	_	-	-	-	_	-	-
Unfunded Deductible and Coinsurance Subsidy	(298,857)	(355,363)	-	-	-	-	-	-	-	-	-	-
Total Retained Earnings	15,362,067	16,513,154	-	-	-	-	-	-	-	-	-	-
Total Liabilities and Fund Equity	47,749,143	45,700,207	-	-	-	-	-	-	-	-	-	

#### WISCONSIN HEALTH INSURANCE RISK SHARING PLAN MONTHLY PROVIDER CONTRIBUTION REPORT AS OF AUGUST 31, 2004

PROVIDER SHARE CALCULATION FOR THE CURRENT MONTH - CLAIMS BY CLAIM TYPE									
REGULAR CLAIMS			USUAL	LESS HIRSP					
	BILLED	U & C	AND	ALLOWED	PROVIDER				
CLAIM TYPE / CATEGORY	CHARGES	PERCENTAGE	CUSTOMARY	CHARGES	SHARE				
CT 20 & 39/20 PROFESSIONAL	4,481,230.17	26.8%	3,280,260.48	1,945,126.80	1,335,133.68				
CT 23 & 39/23 HOSPITAL OUTPATIENT	2,790,500.93	17.1%	2,313,325.27	1,659,990.36	653,334.91				
CT 24 & 39/24 OTHER	395,301.23	13.0%	343,872.54	271,234.77	72,637.77				
CT 40 & 49/40 HOSPITAL INPATIENT	3,782,797.55	17.8%	3,107,946.47	2,035,594.12	1,072,352.35				
CT 41 & 59/41 OTHER	-	13.0%	-	-	-				
TOTAL	\$ 11,449,829.88		\$ 9,045,404.76	\$ 5,911,946.05	\$ 3,133,458.71				
CDOSSOVED OF VIMS	MEDICARE			HIDGD					

CROSSOVER CLAIMS	MEDICARE			HIRSP	
	ALLOWED	MEDICARE	HIRSP	DEDUCTIBLE/	PROVIDER
CLAIM TYPE / CATEGORY	CHARGES	PAID	PAID	COINSURANCE	SHARE
CT 30 & 39/30 PROFESSIONAL	456,968.72	359,196.16	84,447.12	17,024.77	(3,699.33)
CT 31 & 39/31 HOSPITAL OUTPATIENT	386,708.63	282,737.62	91,773.12	14,140.45	(1,942.56)
CT 50 & 49/50 HOSPITAL INPATIENT	1,613,256.92	1,538,531.04	69,879.58	4,846.30	-
CT 51 & 59/51 OTHER	50,886.21	29,314.71	21,571.50	-	-
TOTAL CROSSOVER	\$ 2,507,820.48	\$ 2,209,779.53	\$ 267,671.32	\$ 36,011.52	\$ (5,641.89)

PROVIDER CONTRIBUTION ON THE INCREASE (DECREASE) IN UNPAID LOSSES	\$ (4,544.00)

TOTAL PROVIDER (	CONTRIBUTION NON-PHARMACY	\$ 3,123,272.82

PHARMACY CLAIMS			USUAL	LESS HIRSP	
	BILLED	U & C	AND	ALLOWED	PROVIDER
CLAIM TYPE / CATEGORY	CHARGES	PERCENTAGE	CUSTOMARY	CHARGES	SHARE
CT 10 & 19/10 PRESCRIPTION DRUG					
CLAIMS NOT PROCESSED THROUGH PBM	-	0.00%	-	-	
CT 10 & 19/10 PRESCRIPTION DRUG					
CLAIMS PROCESSED THROUGH PBM	9,209,618.00	0.00%	5,588,657.55	5,588,657.55	-
TOTAL PROVIDER CONTRIBUTION PHARMACY	9,209,618.00		5,588,657.55	5,588,657.55	-

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#### Wisconsin Health Insurance Risk Sharing Plan for the Period Ended August 31, 2004 Calendar Year 2004

			Unaudited Sta	atement of Re	evenues, Expe	enses, and Ch	nanges in Reta	ined Earnings					
Operating Revenues	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Gross Premiums	7,117,706	7,171,995	7,179,941	7,235,705	7,293,859	7,319,775	7,872,385	8,059,267	-	-	-	-	59,250,633
Premium Subsidized Net Premium Revenues	(375,583) 6,742,123	(340,708) 6,831,287	(281,596) 6,898,345	(318,817) 6,916,888	(337,508) 6,956,351	(339,541) 6,980,234	(332,487) 7,539,898	(337,487) 7,721,780			-		(2,663,727) 56,586,906
Provider Contribution	2,436,326	3,990,827	3,672,999	3,897,484	5,552,906	3,786,128	4,513,059	3,123,273	-	-	-	-	30,973,002
Insurer Assessments	3,230,941	3,230,941	3,230,941	3,204,202	3,230,941	3,230,941	2,691,362	2,691,362	-	-	-		24,741,631
Total Operating Revenues	12,409,390	14,053,055	13,802,285	14,018,574	15,740,198	13,997,303	14,744,319	13,536,415	-	-	-	-	112,301,539
Operating Expenses													
Medical Losses:	44 000 074	0.007.057	0.047.447	44.070.444	0.000.055	0.450.004	10.050.150	0.070.544					70 450 045
Losses Paid or Approved for Payment (3) Increase (Decrease) in Unpaid Losses	11,093,371 (4,812,800)	9,267,957 (218,179)	(442,478)	11,270,114 (1,371,744)	9,920,955 4,558,309	9,456,801 (161,117)	10,959,459 1,307,286	8,270,511 (13,021)	-	-	-	-	79,456,615 (1,153,744)
Deductible Subsidy Paid	64,365	69,422	70,732	74,434	55,222	56,102	56,140	35,944	_	_	_	-	482,361
Total Medical Losses	6,344,936	9,119,200	8,845,701	9,972,804	14,534,486	9,351,786	12,322,885	8,293,434	-	-	-	-	78,785,232
Pharmacy Losses:	0.070.405	0.000.400	4 750 000	0.000.004	0.004.000	0.450.007	0.455.007	5 004 000					00 500 000
Losses Paid or Approved for Payment Increase (Decrease) in Unpaid Losses	2,978,135 8,871	2,993,129 236,239	4,758,886 (1,179,715)	3,266,281 318,825	3,331,269 467,800	3,458,237 88,955	3,455,297 553,645	5,261,686 (1,412,550)	-	-	-	-	29,502,920 (917,930)
Drug Rebates	(75,286)	(76,180)		(84,143)	(85,621)	(135,766)	(91,621)	(136,238)	-	-	-	-	(866,154)
Subsidy - Coinsurance Out-of-Pocket Max	9,524	77	1,197	8,127	12,781	17,026	19,025	20,562	-	-	-	-	88,319
Total Pharmacy Losses	2,921,244	3,153,265	3,399,069	3,509,090	3,726,229	3,428,452	3,936,346	3,733,460	-	-	-	-	27,807,155
Total Losses	9,266,180	12,272,465	12,244,770	13,481,894	18,260,715	12,780,238	16,259,231	12,026,894	-	-	-	-	106,592,387
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
DHFS Admin Fees	28,374	44,542	39,798	33,550	37,403	57,235	38,870	52,788	-	-	-	-	332,560
EDS Admin Fees	72,329	115,178	95,128	72,754	74,318	86,289	72,709	71,453	-	-	-	-	660,158
UGS Admin Fees	249,725 5,696	253,755 6,700	237,538 17,520	238,420 8,779	244,275	255,187 17,163	245,436 10,500	239,647	-	-	-	-	1,963,983 114,419
Milliman USA Actuarial Services Other Admin Fees	13,703	23,437	34,063	16,646	41,204 24,474	14,804	12,075	6,857 18,441		-			157,643
Total Administrative Expenses	369,827	443,612	424,047	370,149	421,674	430,678	379,590	389,186	-	-	-	-	3,228,763
Referral fees	6,265	7,490	7,315	7,315	8,435	8,785	8,785	8,798	-	-	-	-	63,188
Total Operating Expenses	9,642,272	12,723,567	12,676,132	13,859,358	18,690,824	13,219,701	16,647,606	12,424,878	-	-	-	-	109,884,338
Net Operating Income (Loss)	2,767,118	1,329,488	1,126,153	159,216	(2,950,626)	777,602	(1,903,287)	1,111,537	-	-	-	-	2,417,201
Non-Operating Revenues (Expenses)	00 774	00.040	00.755	00.400	55 500	05.514	40.450	00.550					000 500
Investment income Total Non-operating Revenues (Expenses)	36,771 36,771	28,849 28,849	36,755 36,755	36,138 36,138	55,560 55,560	35,514 35,514	40,452 40,452	39,550 39,550					309,589 309,589
-													
Net Income (Loss)	2,803,889	1,358,337	1,162,908	195,354	(2,895,066)	813,116	(1,862,835)	1,151,087			•	-	2,726,790
Additions to Retained Earnings													
Policyholder Retained Earnings, Beginning of Period	11,859,597	13,332,224	12,998,587	12,709,989	9,631,981	5,853,486	5,379,754	3,408,111	_	_	_	_	11,859,597
Unfunded Policyholder Subsidies	-	-	-	(2,151,879)	-	-	-	-	-	-	-	-	(2,151,879)
Current Earnings	1,472,627	(333,637)	(288,598)	(926,129)	(3,778,495)	(473,732)	(1,971,643)	718,479	-	-	-	-	(5,581,128)
Retained Earnings, End of Period <sup>(1)</sup>	13,332,224	12,998,587	12,709,989	9,631,981	5,853,486	5,379,754	3,408,111	4,126,590	-	-	-	-	4,126,590
Providers Retained Earnings, Beginning of Period	1,093,317	1,398,585	2,659,264	3,642,010	4,590,673	6,227,371	7,184,952	8,187,787	_	_	_	_	1,093,317
Premium Subsidy Underpayment Adj.	-,000,017	-,000,000	_,000,204	-	-,000,070	-	-,.0.,002	-	-	-	-	-	-,000,017
Current Earnings	305,268	1,260,679 <b>2.659.264</b>	982,746	948,663	1,636,698	957,581	1,002,835	460,512 <b>8.648.299</b>	-	-	-	-	7,554,982
Retained Earnings, End of Period	1,398,585	2,659,264	3,642,010	4,590,673	6,227,371	7,184,952	8,187,787	8,648,299	•	-	•	-	8,648,299
Insurers Retained Earnings, Beginning of Period	2,770,012	3,869,895	4,370,689	4,911,378	5,166,759	4,481,493	4,883,888	4,065,026					2,770,012
Premium Subsidy Underpayment Adj.	2,770,012	-	-1,010,008	-1,011,070	-	-,101, <del>1</del> 33	-+,000,000	4,005,020	-	-	-	-	2,770,012
Current Earnings	1,099,883	500,794	540,689	255,381	(685,266)	402,395	(818,862)	28,602	-	-	-	-	1,323,616
Retained Earnings, End of Period	3,869,895	4,370,689	4,911,378	5,166,759	4,481,493	4,883,888	4,065,026	4,093,628	-	-	-	-	4,093,628
Unfunded Deductible and Coinsurance Sub Retained Earnings, Beginning of Period		(2,010,451)	(2,079,950)	_	(82,561)	(150,564)	(223,692)	(298,857)	_	_	_	_	215,317
Current Earnings	(73,889)	(69,499)	(71,929)	(82,561)	(68,003)	(73,128)	(75,165)	(56,506)	-	-	-	-	(570,680)
Retained Earnings, End of Period	(2,010,451)	(2,079,950)		(82,561)	(150,564)	(223,692)	(298,857)	(355,363)	-	-	-	-	(355,363)
Total Retained Earnings	16,590,253	17,948,590	19,111,498	19,306,852	<u>16,411,78</u> 6	17,224,902	15,362,067	16,513,154					16,513,154
004											_	_	

#### WISCONSIN HEALTH INSURANCE RISK SHARING PLAN 2004 CALENDAR YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSE AS OF AUGUST 31, 2004

MISC REVENUE	JAN 04	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	ост	NOV	DEC	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
TOTAL MISC REVENUE	-	-	-	-	-	•	-		-		-	-	-

													YEAR TO DATE
MISC ADMIN EXP	JAN 04	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	ОСТ	NOV	DEC	TOTAL
Bank Service Charge				897.27									897.27
Postage	12,253.37	20,517.45	18,668.96	12,828.24	21,474.38	17,964.37	9,875.07	16,390.65					129,972.49
LAB Audit Fee	1,450.00	2,920.00	2,920.00	2,920.00	3,000.00	(3,160.00)	1,700.00	1,700.00					13,450.00
Speed Scribe													-
UW Extension													-
NASCHIP							500.00	350.00					850.00
Legal Services			12,473.72										12,473.72
													-
													-
													-
													-
													-
													-
			•			•		•					-
													-
TOTAL MISC ADMIN EXP	13,703.37	23,437.45	34,062.68	16,645.51	24,474.38	14,804.37	12,075.07	18,440.65	-	-	-	-	157,643.48

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#### Wisconsin Health Insurance Risk Sharing Plan Calendar Year 2004 Interim Reconciliation As Of August 31, 2004

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
1. Operating and Administrative Costs under s.149.143(1)	44 000 074	0.007.057	0.047.447	44.070.444	0.000.055	0.450.004	10.050.150	0.070.544					70.450.045
Medical Losses Paid or Approved for Payment Increase (Decrease) in Unpaid Medical Losses	11,093,371 (4,812,800)	9,267,957 (218,179)	9,217,447 (442,478)	11,270,114 (1,371,744)	9,920,955 4,558,309	9,456,801 (161,117)	10,959,459 1,307,286	8,270,511 (13,021)	-	-	-	-	79,456,615 (1,153,744)
Pharmacy Losses Paid or Approved for Payment	2,978,135	2,993,129	4,758,886	3,266,281	3,331,269	3,458,237	3,455,297	5,261,686	-	-	-	_	29,502,920
Increase (Decrease) in Unpaid Pharmacy Losses	8,871	236,239	(1,179,715)	318,825	467,800	88,955	553,645	(1,412,550)	-	-	-	-	(917,930)
Drug Rebates	(75,286)	(76,180)	(181,299)	(84,143)	(85,621)	(135,766)	(91,621)	(136,238)	-	-	-	-	(866,154)
Total Administrative Expenses	376,092	451,102	431,362	377,464	430,109	439,463	388,375	397,984	-	-	-	-	3,291,951
Loss Adjustment Expense Total Operating Expense	9,568,383	12,654,068	12,604,203	13,776,797	18,622,821	13,146,573	16,572,441	12,368,372					109,313,658
gp.	2,222,222	,,	,,		,	, ,	, ,	,,					,,
2. Adjustments to Operating and Administrative Costs													
Total Non-operating Revenue (Expense)	36,771	28,849	36,755	36,138	55,560	35,514	40,452	39,550	-	-	-	-	309,589
3. Total Calendar Year Program Costs to be Split 60% 20% 20%	9,531,612	12,625,219	12,567,448	13,740,659	18,567,261	13,111,059	16,531,989	12,328,822	-	-	-	-	109,004,069
4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excl	udina Subsid	v Costs)											
Funding Shares	Ū	• •											
60% Policyholders	5,718,968	7,575,131	7,540,468	8,244,395	11,140,357	7,866,635	9,919,193	7,397,294	-	-	-	-	65,402,441
20% Providers 20% Insurers	1,906,322 1,906,322	2,525,044 2,525,044	2,513,490 2,513,490	2,748,132 2,748,132	3,713,452 3,713,452	2,622,212 2,622,212	3,306,398 3,306,398	2,465,764 2,465,764	-	-	-	-	21,800,814 21,800,814
2078 Historia	1,000,022	2,020,044	2,010,400	2,740,102	0,7 10,402	2,022,212	0,000,000	2,400,704					21,000,014
5. Subsidy Funding Shares													
Premium subsidies	375,583	340,708	281,596	318,817	337,508	339,541	332,487	337,487	-	-	-	-	2,663,727
Deductible Subsidies Subsidy - coinsurance out-of-pocket Max	64,365 9.524	69,422 77	70,732 1,197	74,434 8.127	55,222 12,781	56,102 17.026	56,140 19.025	35,944 20.562	-	-	-	-	482,361 88,319
Total Subsidies	449,472	410,207	353,525	401,378	405,511	412,669	407,652	393,993	-	-	-	-	3,146,088
	01												
Subsidy Funding Needed by Source in addition to Section 3 Funding Providers	ng Snares 224,736	205,104	176,763	200,689	202,756	206,335	203,826	196.997	_	_	_	_	1,617,206
Insurers	224,736	205,104	176,762	200,689	202,755	206,334	203,826	196,996	-	-	-	_	1,617,201
6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Inclu													
Policyholders	5,718,968	7,575,131	7,540,468	8,244,395	11,140,357	7,866,635	9,919,193	7,397,294	-	-	-	-	65,402,441 23.418.020
Providers Insurers	2,131,058 2,131,058	2,730,148 2,730,147	2,690,253 2,690,252	2,948,821 2,948,821	3,916,208 3,916,207	2,828,547 2,828,546	3,510,224 3,510,224	2,662,761 2,662,760	_	-	-	_	23,418,015
	_, ,	_,,,,	_,,,,_,_	_,,	-,,	_,,_	-,,	_,,,,,,,,,					
7. Non-GPR Revenues by Source Including GPR Subsidies Under	s.20.435(4)(a	ıh)											
Policyholders Premium	6.742.123	6,831,287	6.898.345	6.916.888	6.956.351	6.980.234	7.539.898	7,721,780					56.586.906
Premium and Deductible Subsidies Credited to Policyholders	449,472	410,207	353,525	401,378	405,511	412,669	407,652	393,993	-	-	-	-	3,234,407
Subtotal	7,191,595	7,241,494	7,251,870	7,318,266	7,361,862	7,392,903	7,947,550	8,115,773	-	-	-	-	59,821,313
Providers	2.436.326	3.990.827	3,672,999	3,897,484	5,552,906	3,786,128	4,513,059	3,123,273			_		30,973,002
Insurers	3,230,941	3,990,827	3,672,999	3,097,404	3.230.941	3,766,126	2.691.362	2.691.362	-	-	-	-	24.741.631
Total	12,858,862	14,463,262	14,155,810	14,419,952	16,145,709	14,409,972	15,151,971	13,930,408	-	-	-	-	115,535,946

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#### Wisconsin Health Insurance Risk Sharing Plan Calendar Year 2004 Interim Reconciliation As Of August 31, 2004

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
8. Interim Estimate of Surplus/(Deficit) Account Balance for CY 2	004												
Policyholders Prior Period Surplus / (Deficit)	11.859.597	13.332.224	12.998.587	12.709.989	9.631.981	5.853.486	5,379,754	3,408,111	_	_	_	_	11,859,597
Thorrellod outplus? (Belloit)	11,000,001	10,002,224	12,330,307	12,700,000	3,001,001	3,000,400	3,373,734	3,400,111	_	_	_	_	11,000,001
Premium (Including Premium and Deductible Subsidies)	7,191,595	7,241,494	7,251,870	7,318,266	7,361,862	7,392,903	7,947,550	8,115,773	-	-	-	-	59,821,313
Less Cost Less Unfunded Policyholder Subsidies	5,718,968	7,575,131	7,540,468	8,244,395 2,151,879	11,140,357	7,866,635	9,919,193	7,397,294	-	-	-	-	65,402,441 2.151.879
Monthly Change	1,472,627	(333,637)	(288,598)	(3,078,008)	(3,778,495)	(473,732)	(1,971,643)	718,479	-		-	-	(7,733,007)
5 5 0 1 (/D 5 ii)	40.000.004	10 000 507	10.700.000	0.004.004	5 050 400	- 070 754	0.400.444	4 400 500					4 400 500
Ending Surplus / (Deficit)	13,332,224	12,998,587	12,709,989	9,631,981	5,853,486	5,379,754	3,408,111	4,126,590	-	-	-	-	4,126,590
Assigned Surplus to SFY 2004	46,956	37,564	28,172	18,786	9,386	_	-	-	_	-	-	-	-
Unassigned Surplus	13,285,268	12,961,023	12,681,817	9,613,195	5,844,100	5,379,754	3,408,111	4,126,590	-	-	-	-	4,126,590
Providers													
Prior Period Surplus / (Deficit)	1,093,317	1,398,585	2,659,264	3,642,010	4,590,673	6,227,371	7,184,952	8,187,787	-	-	-	-	1,093,317
Contribution	2,436,326	3.990.827	3.672.999	3.897.484	5.552.906	3.786.128	4.513.059	3.123.273				_	30.973.002
Less Cost	2,430,320	2,730,148	2.690.253	2,948,821	3,916,208	2.828.547	3,510,224	2,662,761	-	-	-		23,418,020
Premium Subsidy Underpayment Adj.		· · · · -	-	· · · -		-	· · · -		-	-	-	-	<u> </u>
Monthly Change	305,268	1,260,679	982,746	948,663	1,636,698	957,581	1,002,835	460,512	-	-	-	-	7,554,982
Ending Surplus / (Deficit)	1,398,585	2,659,264	3,642,010	4,590,673	6,227,371	7,184,952	8,187,787	8,648,299	-	-	-		8,648,299
Insurers													
Prior Period Surplus / (Deficit)	2,770,012	3,869,895	4,370,689	4,911,378	5,166,759	4,481,493	4,883,888	4,065,026	-	-	-	-	2,770,012
Assessment	3.230.941	3.230.941	3.230.941	3,204,202	3.230.941	3.230.941	2.691.362	2.691.362					24.741.631
Less Cost	2,131,058	2,730,147	2,690,252	2,948,821	3,916,207	2,828,546	3,510,224	2,662,760			-		23,418,015
Premium Subsidy Underpayment Adj.							<u> </u>	-	-	-	-	-	
Monthly Change	1,099,883	500,794	540,689	255,381	(685,266)	402,395	(818,862)	28,602	-	-	-	-	1,323,616
Ending Surplus / (Deficit)	3,869,895	4,370,689	4,911,378	5,166,759	4,481,493	4,883,888	4,065,026	4,093,628	-	_	-	-	4,093,628
Unfunded Deductible and Coinsurance Subsidy													
Prior Period Surplus / (Deficit)	(1,936,562)		(2,079,950)		(82,561)	(150,564)	(223,692)	(298,857)	-	-	-	-	215,317
Monthly Change Ending Surplus / (Deficit)	(73,889)	(69,499) (2.079,950)	(71,929)	(82,561) (82,561)	(68,003) (150,564)	(73,128) (223,692)	(75,165) (298,857)	(56,506)					(570,680)
Enaing Surplus / (Delicit)	(2,010,431)	(2,019,930)	(2,131,079)	(02,501)	(130,304)	(223,032)	(230,037)	(333,303)					(555,565)
Total HIRSP Retained Earnings	16,590,253	17,948,590	19,111,498	19,306,852	16,411,786	17,224,902	15,362,067	16,513,154	-	-	-	-	16,513,154
<b>G</b>					•								•

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#### Wisconsin Health Insurance Risk Sharing Plan August 31, 2004 Calendar Year 2004

#### **Unaudited Balance Sheet**

Assets	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Cash and Cash Equivalents	40,798,764	44,736,354	50,867,643	50,355,425	42,778,753	50,563,375	44,175,497	43,792,481	_	_	_	_
Other Receivables (2)	440.887	478,803	391.542	419.460	219,745	189.920	39,541	109.277			_	
Drug Rebates Receivable	532,476	608,656	789,956	874,099	805,475	941,241	694,465	830,703	_	-	_	_
Assessments Receivable	3,233,477	415,828	150,150	132,574	110,295	90,547	2,781,901	896,397	_	_	_	_
Prepaid Items	52,035	71,517	52,848	70,020	45,579	27,614	57,739	71,349	_	-	_	_
Total Assets	45,057,639	46,311,158	52,252,139	51,851,578	43,959,847	51,812,697	47,749,143	45,700,207	-	-	-	
101417100010	10,001,000	10,011,100	02,202,100	01,001,010	10,000,011	01,012,001	,,	10,100,201				
Liabilities and Fund Equity												
Liabilities:												
Unpaid Medical loss Liabilities	13,706,091	13,359,225	13,300,096	12,445,427	15,395,789	15,294,266	16,129,059	16,120,582	-	-	-	-
Unpaid Prescription Drug Loss Liabilities	1,712,604	1,948,843	769,128	1,087,953	1,555,753	1,644,708	2,198,353	785,803	-	-	-	-
Unpaid Loss Adjustment Expense	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	-	-	-	-
Unearned Premiums	11,026,649	5,952,858	14,918,164	11,162,256	6,043,829	16,566,388	12,626,044	6,831,139	-	-	-	-
Unearned Assessments	495,774	5,665,239	2,717,945	6,436,773	3,219,789	-	-	3,966,257	-	-	-	-
Accounts Payable and Other Accrued Liabilities	866,268	776,403	775,308	752,317	672,901	422,433	773,620	823,272	-	-	-	-
Total Liabilities	28,467,386	28,362,568	33,140,641	32,544,726	27,548,061	34,587,795	32,387,076	29,187,053	-	-	-	-
Fund Equity:	10 000 001	40 000 507	10 700 000	0.004.004	5 050 400	5 070 754	0.400.444	4 400 500				
Policyholder	13,332,224	12,998,587	12,709,989	9,631,981	5,853,486	5,379,754	3,408,111	4,126,590	-	-	-	-
Providers	1,398,585	2,659,264	3,642,010	4,590,673	6,227,371	7,184,952	8,187,787	8,648,299	-	-	-	-
Insurers	3,869,895	4,370,689	4,911,378	5,166,759	4,481,493	4,883,888	4,065,026	4,093,628	-	-	-	-
Unfunded Deductible and Coinsurance Subsidy	(2,010,451)	(2,079,950)	(2,151,879)	(82,561)	(150,564)	(223,692)	(298,857)	(355,363)	-	-	-	
Total Retained Earnings	16,590,253	17,948,590	19,111,498	19,306,852	16,411,786	17,224,902	15,362,067	16,513,154	-	-	-	-
Total Liabilities and Fund Equity	45,057,639	46,311,158	52,252,139	51,851,578	43,959,847	51,812,697	47,749,143	45,700,207	-	-	-	

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN EARNED PREMIUM

## **FISCAL YEAR 2005**

EAF	RNED PREMIUM
MONTH	FY 04
JUL	7,539,898
AUG	7,721,780
SEP	
OCT	
NOV	
DEC	
JAN	
FEB	
MAR	
APR	
MAY	
JUN	
TOTAL	\$15,261,678

#### Wisconsin Health Insurance Risk Sharing Plan Assessment Status

	Total Ass for 7/1/04		1st Insta		2nd Inst	
Period	Payments	A/R	Payments	A/R	Payments	A/R
Ending	Received	Balance	Received	Balance	Received	Balance
07/10/04	-	16,148,173.17	-	8.074.086.59	110001100	8,074,086.58
07/17/04	-	16,148,173.17	-	8,074,086.59		8,074,086.58
07/24/04	-	16,148,173.17	35,842.61	8,038,243.98	35,842.64	8,038,243.94
07/31/04	-	16,148,173.17	330,509.13	7,707,734.85	215,696.51	7,822,547.43
Jul Total	\$ -	,,	\$ 366,351.74	.,,	\$ 251,539.15	.,,.
	1 *		<del>-</del>		<del>+</del>	
08/07/04	_	16,148,173.17	-	7,707,734.85	_	7,822,547.43
08/14/04	_	16,148,173.17	_	7,707,734.85	_	7,822,547.43
08/21/04	_	16,148,173.17	_	7,707,734.85	_	7,822,547.43
08/31/04	8,537,442.43	7,610,730.74	6,824,046.62	883,688.23	1,713,395.81	6,109,151.62
Aug Total	\$ 8,537,442.43	7,010,100.11	\$ 6,824,046.62	000,000.20	\$ 1,713,395.81	0,100,101.02
rug rota.	Ψ 0,001,112.10		<b>V</b> 0,021,010.02	•	<b>\$</b> 1,1 10,000.01	
Con Total	•		•		•	
Sep Total	\$ -		\$ -	i	\$ -	
	I	1				
Oct Total	\$ -		\$ -		\$ -	
Nov Total	\$ -	-	\$ -	<u>.</u>	\$ -	
Dec Total	\$ -		\$ -		\$ -	
Dec Total			Ψ -	•	Ψ -	

Grand Total \$ 8,537,442.43 \$ 7,610,730.74

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**\$** 7,190,398.36 **\$** 883,688.23

**\$ 1,964,934.96 \$ 6,109,151.62** 

Monthly Applicant Activity August Month End, 2004

		Plan 1A	Plan 1B	Plan 2	Total
Number of Applications Pending July Month End*, 2004		376	284	29	689
Number of Applications Received in August, 2004		196	242	6	444
Number of Applications Rejected in August, 2004		20	10	1	31
Number of Applications Closed in August, 2004		53	41	1	95
Number of Applications Pending August End*, 2004	**	335	242	21	598
Number of Applications Approved in August, 2004		164	233	12	409

<sup>\*</sup> The above numbers are based on Month End which is the last Friday in the Month. August data includes 7-31-04 to 8-27-04.

<sup>\*\*</sup>Pending applications include applications received and not processed and applications pending for more information.

		Plan 1A	Plan 1B	Plan 2	Total
Detail of Ap	oplications Rejected				
	Insufficient premium submitted	13	1	1	15
	Eligible for Group Health Plan	2	6	0	8
	Current Medicaid coverage	4	3	0	7
	Other	1	0	0	1
Subtotal		20	10	1	31
Detail of Ap	oplications Closed				
-	Applicant Request	14	9	0	23
	Proper eligibility requested; never received	14	24	0	38
	Application data requested; never received	25	8	1	34
Subtotal		53	41	1	95

## Applicant Eligibility Determination August 2004

A.	Medicare Eligible	12
B.	HIV +	4
C.	Eligible Individual	169
D.	Letter of Medical Eligibility	224
	Notice of Rejection by:  Blue Cross & Blue Shield United of Wisconsin	54
	Humana Insurance Company Wisconsin Physicians Service Insurance Fortis Benefits Insurance	34 23 19
	Mega Life and Health Insurance Golden Rule Insurance Company American Family	18 17 12
	Security Health Plan American Medical Security Group American Republic	8 7 4
	John Alden Life Insurance Midwest National Life Insurance	4 4
	Pekin Life Insurance Unity Health Plan American National Life Insurance Company	3 3 1
	Celtic Life Insurance Company Dean Health Plan	1 1
	Physicians Mutual Insurance Valley Health Plan	1 1
	2. Notice of Benefit Reduction	9
	3. Notice of Premium increase due to a Health Reason	0
Total		409

#### **RESTATED POLICIES IN FORCE - AS OF AUGUST 2004 MONTH END**

	Total Subsidy		Т	otal Non	on-Subsidy			Combine	d Total*		
	Plan 1A	Plan 2	Total	Plan 1A	Plan 1B	Plan 2	Total	Plan 1A	Plan 1B	Plan 2	Total
September, 2003	3,153	813	3,966	5,378	7,114	923	13,415	8,531	7,114	1,736	17,381
October, 2003	3,188	815	4,003	5,264	7,221	918	13,403	8,452	7,221	1,733	17,406
November, 2003	3,201	813	4,014	5,275	7,339	920	13,534	8,476	7,339	1,733	17,548
December, 2003	3,200	810	4,010	5,319	7,413	930	13,662	8,519	7,413	1,740	17,672
January, 2004	3,144	809	3,953	4,962	7,915	929	13,806	8,106	7,915	1,738	17,759
February, 2004	3,157	805	3,962	5,029	8,012	938	13,979	8,186	8,012	1,743	17,941
March, 2004	3,174	796	3,970	5,072	8,134	947	14,153	8,246	8,134	1,743	18,123
April, 2004	3,177	788	3,965	5,104	8,171	955	14,230	8,281	8,171	1,743	18,195
May, 2004	3,201	793	3,994	5,156	8,334	956	14,446	8,357	8,334	1,749	18,440
June, 2004	3,200	800	4,000	5,196	8,421	965	14,582	8,396	8,421	1,765	18,582
July, 2004	2,903	730	3,633	5,336	8,343	995	14,674	8,239	8,343	1,725	18,307
August, 2004	2,940	742	3,682	5,293	8,386	1,004	14,683	8,233	8,386	1,746	18,365

## **Detail of Total Subsidy Policies in Force**

	Level 0	Level 1	Level 2	Level 3	Level 4	Level 5	Total
September, 2003	13,415	550	594	743	1,474	605	17,381
October, 2003	13,403	555	603	743	1,500	602	17,406
November, 2003	13,534	558	600	749	1,507	600	17,548
December, 2003	13,662	554	598	742	1,511	605	17,672
January, 2004	13,806	523	589	738	1,544	559	17,759
February, 2004	13,979	525	590	740	1,547	560	17,941
March, 2004	14,153	526	595	739	1,549	561	18,123
April, 2004	14,230	529	600	736	1,542	558	18,195
May, 2004	14,446	522	602	742	1,560	568	18,440
June, 2004	14,582	526	598	745	1,564	567	18,582
July, 2004	14,674	544	541	655	1,327	566	18,307
August, 2004	14,683	548	546	662	1,358	568	18,365

<sup>\*</sup>Level 0 = Income > \$25,000

<sup>\*</sup>Level 1 = Income \$17,000 - \$19,999

<sup>\*</sup>Level 2 = Income \$14,000 - \$16,999

<sup>\*</sup>Level 3 = Income \$10,000 - \$13,999

<sup>\*</sup>Level 4 = Income <=\$9,999

<sup>\*</sup>Level 5 = Income \$20,000 - \$24,999

# Total Policies in Force by Plan, Gender, & Age Group as of August 31, 2004

### Male

Plan	Gender	Age Group	# Policy holders
1A	Male	0 - 24	451
1A	Male	25 - 29	199
1A	Male	30 - 34	192
1A	Male	35 - 39	270
1A	Male	40 - 44	423
1A	Male	45 - 49	509
1A	Male	50 - 54	559
1A	Male	55 - 59	507
1A	Male	60 - 64	500
1A	Male	65+	3
		Total:	3,613

Plan	Gender	Age Group	# Policy holders
1B	Male	0 - 24	243
1B	Male	25 - 29	36
1B	Male	30 - 34	71
1B	Male	35 - 39	136
1B	Male	40 - 44	278
1B	Male	45 - 49	409
1B	Male	50 - 54	600
1B	Male	55 - 59	775
1B	Male	60 - 64	1,227
1B	Male	65+	2
		Total:	3,777

Plan	Gender	Age Group	# Policy holders
2	Male	0 - 24	2
2	Male	25 - 29	13
2	Male	30 - 34	17
2	Male	35 - 39	37
2	Male	40 - 44	83
2	Male	45 - 49	124
2	Male	50 - 54	126
2	Male	55 - 59	112
2	Male	60 - 64	99
2	Male	65+	121
	,	Total:	734

Plan	Gender	Age Group	# Policy holders
1A	Female	0 - 18	174
1A	Female	19 - 24	230
1A	Female	25 - 29	212
1A	Female	30 - 34	204
1A	Female	35 - 39	253
1A	Female	40 - 44	342
1A	Female	45 - 49	511
1A	Female	50 - 54	660
1A	Female	55 - 59	856
1A	Female	60 - 64	1,166
1A	Female	65+	12
		Total:	4,620

Plan	Gender	Age Group	# Policy holders
1B	Female	0 - 18	91
1B	Female	19 - 24	60
1B	Female	25 - 29	45
1B	Female	30 - 34	75
1B	Female	35 - 39	133
1B	Female	40 - 44	278
1B	Female	45 - 49	443
1B	Female	50 - 54	652
1B	Female	55 - 59	1,067
1B	Female	60 - 64	1,761
1B	Female	65+	4
		Total:	4,609

Plan	Gender	Age Group	# Policy holders
2	Female	19 - 24	3
2	Female	25 - 29	5
2	Female	30 - 34	17
2	Female	35 - 39	27
2	Female	40 - 44	67
2	Female	45 - 49	105
2	Female	50 - 54	139
2	Female	55 - 59	144
2	Female	60 - 64	200
2	Female	65+	305
		Total:	1,012

# Total Policies in Force by Plan, Gender, Zone & Age Group as of August 31, 2004

### Male

Plan	Zone	Gender	Age Group	# Policy holders
1A	1	Male	0 - 24	28
1A	1	Male	25 - 29	22
1A	1	Male	30 - 34	22
1A	1	Male	35 - 39	35
1A	1	Male	40 - 44	36
1A	1	Male	45 - 49	48
1A	1	Male	50 - 54	39
1A	1	Male	55 - 59	43
1A	1	Male	60 - 64	36
			Total:	309

Plan	Zone	Gender	Age Group	# Policy holders
1A	2	Male	0 - 24	141
1A	2	Male	25 - 29	65
1A	2	Male	30 - 34	64
1A	2	Male	35 - 39	78
1A	2	Male	40 - 44	125
1A	2	Male	45 - 49	134
1A	2	Male	50 - 54	164
1A	2	Male	55 - 59	135
1A	2	Male	60 - 64	129
1A	2	Male	65+	2
			Total:	1,037

Plan	Zone	Gender	Age Group	# Policy holders
1A	3	Male	0 - 24	282
1A	3	Male	25 - 29	112
1A	3	Male	30 - 34	106
1A	3	Male	35 - 39	157
1A	3	Male	40 - 44	262
1A	3	Male	45 - 49	327
1A	3	Male	50 - 54	356
1A	3	Male	55 - 59	329
1A	3	Male	60 - 64	335
1A	3	Male	65+	1
			Total:	2,267

Plan	Zone	Gender	Age Group	# Policy holders
1A	1	Female	0 - 18	9
1A	1	Female	19 - 24	20
1A	1	Female	25 - 29	29
1A	1	Female	30 - 34	21
1A	1	Female	35 - 39	14
1A	1	Female	40 - 44	27
1A	1	Female	45 - 49	43
1A	1	Female	50 - 54	68
1A	1	Female	55 - 59	82
1A	1	Female	60 - 64	83
1A	1	Female	65+	1
			Total:	397

Plan	Zone	Gender	Age Group	# Policy holders
1A	2	Female	0 - 18	47
1A	2	Female	19 - 24	67
1A	2	Female	25 - 29	62
1A	2	Female	30 - 34	74
1A	2	Female	35 - 39	93
1A	2	Female	40 - 44	108
1A	2	Female	45 - 49	149
1A	2	Female	50 - 54	163
1A	2	Female	55 - 59	240
1A	2	Female	60 - 64	333
1A	2	Female	65+	5
			Total:	1,341

Plan	Zone	Gender	Age Group	# Policy holders
1A	3	Female	0 - 18	118
1A	3	Female	19 - 24	143
1A	3	Female	25 - 29	121
1A	3	Female	30 - 34	109
1A	3	Female	35 - 39	146
1A	3	Female	40 - 44	207
1A	3	Female	45 - 49	319
1A	3	Female	50 - 54	429
1A	3	Female	55 - 59	534
1A	3	Female	60 - 64	750
1A	3	Female	65+	6
			Total:	2,882

# Total Policies in Force by Plan, Gender, Zone & Age Group as of August 31, 2004

#### Male

Plan	Zone	Gender	Age Group	# Policy holders
1B	1	Male	0 - 24	15
1B	1	Male	25 - 29	4
1B	1	Male	30 - 34	5
1B	1	Male	35 - 39	23
1B	1	Male	40 - 44	27
1B	1	Male	45 - 49	26
1B	1	Male	50 - 54	45
1B	1	Male	55 - 59	46
1B	1	Male	60 - 64	69
			Total:	260

Plan	Zone	Gender	Age Group	# Policy holders
1B	1	Female	0 - 18	7
1B	1	Female	19 - 24	4
1B	1	Female	25 - 29	7
1B	1	Female	30 - 34	11
1B	1	Female	35 - 39	9
1B	1	Female	40 - 44	16
1B	1	Female	45 - 49	28
1B	1	Female	50 - 54	38
1B	1	Female	55 - 59	65
1B	1	Female	60 - 64	114
			Total:	299

Plan	Zone	Gender	Age Group	# Policy holders
1B	2	Male	0 - 24	83
1B	2	Male	25 - 29	7
1B	2	Male	30 - 34	26
1B	2	Male	35 - 39	30
1B	2	Male	40 - 44	91
1B	2	Male	45 - 49	110
1B	2	Male	50 - 54	183
1B	2	Male	55 - 59	208
1B	2	Male	60 - 64	339
			Total:	1,077

Plan	Zone	Gender	Age Group	# Policy holders
1B	2	Female	0 - 18	34
1B	2	Female	19 - 24	18
1B	2	Female	25 - 29	13
1B	2	Female	30 - 34	22
1B	2	Female	35 - 39	48
1B	2	Female	40 - 44	77
1B	2	Female	45 - 49	142
1B	2	Female	50 - 54	203
1B	2	Female	55 - 59	310
1B	2	Female	60 - 64	504
1B	2	Female	65+	3
			Total:	1,374

Plan	Zone	Gender	Age Group	# Policy holders
1B	3	Male	0 - 24	145
1B	3	Male	25 - 29	25
1B	3	Male	30 - 34	40
1B	3	Male	35 - 39	83
1B	3	Male	40 - 44	160
1B	3	Male	45 - 49	273
1B	3	Male	50 - 54	372
1B	3	Male	55 - 59	521
1B	3	Male	60 - 64	819
1B	3	Male	65+	2
			Total:	2,440

Plan	Zone	Gender	Age Group	# Policy holders
1B	3	Female	0 - 18	50
1B	3	Female	19 - 24	38
1B	3	Female	25 - 29	25
1B	3	Female	30 - 34	42
1B	3	Female	35 - 39	76
1B	3	Female	40 - 44	185
1B	3	Female	45 - 49	273
1B	3	Female	50 - 54	411
1B	3	Female	55 - 59	692
1B	3	Female	60 - 64	1,143
1B	3	Female	65+	1
			Total:	2,936

# Total Policies in Force by Plan, Gender, Zone & Age Group as of August 31, 2004

## Male

Plan	Zone	Gender	Age Group	# Policy holders
2	1	Male	0 - 24	1
2	1	Male	25 - 29	2
2	1	Male	30 - 34	5
2	1	Male	35 - 39	10
2	1	Male	40 - 44	14
2	1	Male	45 - 49	24
2	1	Male	50 - 54	21
2	1	Male	55 - 59	16
2	1	Male	60 - 64	11
2	1	Male	65+	5
			Total:	109

Plan	Zone	Gender	Age Group	# Policy holders
2	1	Female	19 - 24	1
2	1	Female	30 - 34	2
2	1	Female	35 - 39	2
2	1	Female	40 - 44	10
2	1	Female	45 - 49	16
2	1	Female	50 - 54	15
2	1	Female	55 - 59	13
2	1	Female	60 - 64	13
2	1	Female	65+	26
			Total:	98

Plan	Zone	Gender	Age Group	# Policy holders
2	2	Male	25 - 29	1
2	2	Male	30 - 34	7
2	2	Male	35 - 39	10
2	2	Male	40 - 44	23
2	2	Male	45 - 49	32
2	2	Male	50 - 54	38
2	2	Male	55 - 59	29
2	2	Male	60 - 64	39
2	2	Male	65+	36
			Total:	215

Plan	Zone	Gender	Age Group	# Policy holders
2	2	Female	25 - 29	2
2	2	Female	30 - 34	5
2	2	Female	35 - 39	13
2	2	Female	40 - 44	26
2	2	Female	45 - 49	29
2	2	Female	50 - 54	41
2	2	Female	55 - 59	44
2	2	Female	60 - 64	56
2	2	Female	65+	86
			Total:	302

Plan	Zone	Gender	Age Group	# Policy holders
2	3	Male	0 - 24	1
2	3	Male	25 - 29	10
2	3	Male	30 - 34	5
2	3	Male	35 - 39	17
2	3	Male	40 - 44	46
2	3	Male	45 - 49	68
2	3	Male	50 - 54	67
2	3	Male	55 - 59	67
2	3	Male	60 - 64	49
2	3	Male	65+	80
			Total:	410

Plan	Zone	Gender	Age Group	# Policy holders
2	3	Female	19 - 24	2
2	3	Female	25 - 29	3
2	3	Female	30 - 34	10
2	3	Female	35 - 39	12
2	3	Female	40 - 44	31
2	3	Female	45 - 49	60
2	3	Female	50 - 54	83
2	3	Female	55 - 59	87
2	3	Female	60 - 64	131
2	3	Female	65+	193
			Total:	612

## Total Subsidy/Non-Subsidy Restated for August 31, 2004

Plan		# Policyholders
1A	Non-Subsidized	5,293
1A	Subsidized	2,940
1B	Non-Subsidized	8,386
2	Non-Subsidized	1,004
2	Subsidized	742
	Total	: 18,365

## Total Subsidy by Level Restated for August 31, 2004

Subsidy Level	# Policyholders
Level 0	14,683
Level 1	548
Level 2	546
Level 3	662
Level 4	1,358
Level 5	568
Total:	18,365

## Total Policies in Force by Zone, Plan and Subsidy Restated for August 31, 2004

	# Policyholders
Plan 1A, Zone 1, Non-Subsidized	397
Plan 1A, Zone 1, Subsidized	309
Plan 1A, Zone 2, Non-Subsidized	1,601
Plan 1A, Zone 2, Subsidized	777
Plan 1A, Zone 3, Non-Subsidized	3,295
Plan 1A, Zone 3, Subsidized	1,854
Plan 1B, Zone 1, Non-Subsidized	559
Plan 1B, Zone 2, Non-Subsidized	2,451
Plan 1B, Zone 3, Non-Subsidized	5,376
Plan 2, Zone 1, Non-Subsidized	97
Plan 2, Zone 1, Subsidized	110
Plan 2, Zone 2, Non-Subsidized	307
Plan 2, Zone 2, Subsidized	210
Plan 2, Zone 3, Non-Subsidized	600
Plan 2, Zone 3, Subsidized	422
Total	18,365

## Customer Service Monthly Operating Report August, 2004

Aug-04	Calls	Calls	#	%	Average	Shortest	Longest	Average
Week Ending	Offered	Handled	Abandoned	Abandoned	Wait	Wait	Wait	Talk
6-Aı	ıg 2,382	2,256	126	5.3%	2.50	0.00	7.50	2.83
13-Aı	ıg 2,153	2,031	122	5.7%	2.31	0.00	7.39	3.00
20-Au	ıg 2,283	2,141	142	6.2%	2.57	0.00	9.34	3.00
27-Aı	ıg 2,356	2,232	124	5.3%	2.30	0.00	6.13	2.61
Tot	al 9,174	8,660	514	5.6%	2.42	0.00	9.34	2.86

Historical	Calls	Calls	#	%	Average	Shortest	Longest	Average
2003/2004 Stats	Offered	Handled	Abandoned	Abandoned	Wait	Wait	Wait	Talk
Aug-03	11,590	10,859	731	6.3%	2.81	0.00	9.69	2.54
Sep-03	10,203	8,894	1,309	12.8%	4.80	0.00	10.87	2.61
Oct-03	13,226	11,261	1,965	14.9%	5.39	0.00	18.38	2.62
Nov-03	8,836	7,280	1,556	17.6%	6.59	0.00	20.02	3.16
Dec-03	9,053	7,741	1,312	14.5%	5.78	0.00	15.11	3.56
Jan-04	11,781	10,401	1,380	11.7%	5.12	0.00	13.30	3.40
Feb-04	10,435	9,338	1,097	10.5%	4.43	0.00	14.29	3.22
Mar-04	11,213	9,694	1,519	13.5%	5.03	0.00	13.07	3.10
Apr-04	13,716	12,529	1,187	8.7%	3.56	0.00	11.07	2.87
May-04	9,600	8,908	692	7.2%	2.97	0.00	11.37	3.19
Jun-04	10,572	9,360	1,212	11.5%	4.60	0.00	12.18	3.34
Jul-04	11,453	10,865	588	4.9%	2.79	0.00	8.57	2.88
Aug-04	9,174	8,660	514	5.6%	2.42	0.00	9.34	2.86

Most Commonly Asked Questions to Customer Service - August 2004

- 1. What is my claim status?
- 2. Is this a covered service?
- 3. I do not understand my premium.

	Written Correspondence - August 2004												
	Beginning Inventory	Received	Completed	< 10 days	Inventory 10-30 days	•							
Customer Srvc	0	173	158	15	0	0	15						
Enrollment	0	388	388	0	0	0	0						
Underwriting	18	45	48	12	3	0	15						

#### **CLAIMS PROCESSED**

Claims that have finalized to payment or denial during the month

Claim type/Description	Jan-03	Feb-03	Mar-03	Apr-03	May-03	Jun-03	Jul-03	Aug-03	Sep-03	Oct-03	Nov-03	Dec-03
CT10 Pharmacy (Non-PBM)**	5	15	0	1	34	1	10	2	2	1	0	0
CT10 Pharmacy (PBM)***	224	54	131	218	3	50	11	53	31	0	0	0
WP Wellpoint Pharmacy ****	49,812	51,356	52,987	52,057	80,707 <sup>(1)</sup>	54,288	55,136	55,060	56,913	87,190 <sup>(1)</sup>	59,373	61,341
CT19 Pharmacy Adjustments (Non-PBM)**	3	4	6	2	0	0	0	0	0	0	0	0
CT19 Pharmacy Adj. (PBM) ***	0	0	0	0	0	0	0	0	0	0	0	0
WP Wellpoint Reversals *****	-2,332	-2,444	-2,447	-2,337	-3,638	-2,489	-2,415	-2,537	-2,566	-4,026	-2,846	-2,869
CT20 Physicians	23,478	21,121	20,379	18,370	24,588	19,996	19,487	24,257	18,355	24,187	26,047	23,229
CT23 Outpatient Hospital	3,958	3,702	3,430	3,406	4,309	3,757	3,499	4,356	3,438	3,992	4,537	4,774
CT24 Miscellaneous	1,833	1,605	1,591	1,290	1,631	1,492	1,594	1,654	1,621	1,907	1,834	2,222
CT30 Professional Crossovers	4,625	4,102	4,098	3,282	4,371	3,639	3,605	4,351	3,479	3,996	4,394	3,544
CT31 Outpatient Crossovers	931	800	837	766	891	825	727	936	819	1,128	1,034	1,236
CT39 Professional Adjustments	178	250	512	277	431	216	509	452	331	200	181	237
CT40 Inpatient Hospital	391	354	286	290	384	342	304	348	244	384	376	408
CT41 Nursing Home	38	22	44	15	26	30	25	18	20	38	25	19
CT49 Inpatient Hospital Adjustments	7	9	8	15	11	16	31	23	18	36	7	8
CT50 Inpatient Hospital Crossovers	85	90	77	49	92	72	61	102	69	63	73	65
CT51 Nursing Home Crossovers	10	5	15	12	25	12	21	20	12	8	3	9
CT59 Nursing Home Adjustments	0	0	0	2	0	1	0	0	0	0	0	0
Total claims processed*	83,246	81,045	81,954	77,715	113,865	82,248	82,605	89,095	82,786	119,104	95,038	94,223

Claim type/Description	Jan-04	Feb-04	Mar-04	Apr-04	May-04	Jun-04	Jul-04	Aug-04	Sep-04	Oct-04	Nov-04	Dec-04
CT10 Pharmacy (Non-PBM)**	0	0	0	0	0	0	0	0				
CT10 Pharmacy (PBM)***	0	0	0	0	0	0	0	0				
WP Wellpoint Pharmacy ****	58,899	59,759	91,483 <sup>(1)</sup>	62,203	65,556	62,837	63,948 <sup>(1)</sup>	63,279				
CT19 Pharmacy Adjustments (Non-PBM)**	0	0	0	0	0	0	0	0				
CT19 Pharmacy Adj. (PBM) ***	0	0	0	0	0	0	0	0				
WP Wellpoint Reversals *****	-2,475	-2,864	-4,082	-2,709	-3,271	-2,875	-3,006	-3,107				
CT20 Physicians	33,839	30,416	22,807	28,748	25,080	26,444	25,415	19,780				
CT23 Outpatient Hospital	5,585	4,645	4,107	4,798	4,121	4,083	4,953	3,962				
CT24 Miscellaneous	2,216	2,228	2,117	2,559	2,216	1,835	2,278	1,823				
CT30 Professional Crossovers	5,805	4,941	4,116	5,534	4,072	4,465	5,037	3,434				
CT31 Outpatient Crossovers	1,526	867	1,106	1,291	1,129	1,325	1,216	935				
CT39 Professional Adjustments	469	647	1,446	960	1,298	393	618	857				
CT40 Inpatient Hospital	598	428	458	521	423	363	457	380				
CT41 Nursing Home	41	62	34	41	31	34	18	10				
CT49 Inpatient Hospital Adjustments	6	10	20	21	16	14	17	3				
CT50 Inpatient Hospital Crossovers	125	86	79	104	87	65	99	71				
CT51 Nursing Home Crossovers	14	6	14	12	13	7	19	14				
CT59 Nursing Home Adjustments	0	0	6	2	17	1	0	1				
Total claims processed*	106,648	101,231	123,711	104,085	100,788	98,991	101,069	91,442	0	0	0	0

<sup>\*</sup>The totals include paper and EMC claims. PBM claims are included in the totals starting with August 2001. In the PBM environment, each prescription processed by the PBM is counted as one claim where, previously, a claim may have included multiple prescriptions. Therefore, due to the change in pharmacy claims processing, the volume of claims processed prior to August 2001 is not comparable to the volume of claims processed in August 2001 and later.

<sup>\*\*</sup> Pharmacy non-PBM claims are for dates of service prior to August 1, 2001.

<sup>\*\*\*</sup> Pharmacy PBM claims are for dates of service between August 1, 2001 and December 31, 2001; claims were submitted through the Wellpoint system, but paid by the Fiscal Agent.

<sup>\*\*\*\*</sup> Wellpoint Pharmacy claims are processed solely through the Wellpoint system under the new co-pay guidelines and account for all prescriptions filled beginning January 1, 2002.

<sup>\*\*\*\*\*</sup>Wellpoint reversals will always negate a Wellpoint pharmacy claim beginning January 1, 2002.

<sup>(1)</sup> Increase in claims count is due to an additional pay period. This month includes 3 pay periods.

#### **AVERAGE CLAIMS PROCESSING DAYS**

Claim type/Description*	Aug-03	Sep-03	** Oct-03	Nov-03	Dec-03	Jan-04	Feb-04	Mar-04	Apr-04	May-04	Jun-04	Jul-04	Aug-04
CT10 Pharmacy	511	632	2	0	0	0	0	0	0	0	0	0	0
CT19 Pharmacy Adjustments	0	0	0	0	0	0	0	0	0	0	0	0	0
CT20 Physicians	14	13	15	15	17	16	13	13	13	15	11	12	14
CT23 Outpatient Hospital	14	12	15	13	14	13	13	11	11	13	11	10	11
CT24 Miscellaneous	19	15	18	15	16	18	16	13	14	15	13	14	14
CT30 Professional Crossovers	11	11	13	13	15	15	11	11	12	11	10	11	14
CT31 Outpatient Crossovers	17	15	18	16	18	17	18	17	16	19	15	13	15
CT39 Professional Adjustments	11	13	22	37	44	43	34	19	23	29	21	15	11
CT40 Inpatient Hospital	16	15	20	16	17	20	17	15	18	17	16	15	15
CT41 Nursing Home	13	17	18	16	14	18	15	10	12	11	16	10	17
CT49 Inpatient Hospital Adjustments	12	15	17	37	48	44	30	24	21	19	14	10	6
CT50 Inpatient Hospital Crossovers	11	10	13	10	12	12	13	13	12	14	11	9	11
CT51 Nursing Home Crossovers	16	12	21	20	12	21	11	10	10	6	11	9	9
CT59 Nursing Home Adjustments	0	0	0	0	0	0	0	19	76	16	24	0	16
Average for the Month	14	13 *	16	13	**** 16	**** 16	14	13	14	***** 16	12	12	13

<sup>\*</sup>A "0" days to process indicates there were no claims submitted for that claim type in that month.

Wellpoint pharmacy claims processed solely through the Wellpoint system are not included in this report for prescriptions filled beginning January 1, 2002.

<sup>\*\*</sup> No Wellpoint paper claims were paid in May and October. This number includes only non-PBM claims.

<sup>\*\*\*</sup>Processing of claims received October 1, 2003 and after did not begin until October 13, 2003 due to HIPAA changes, making the average processing days higher than normal.

<sup>\*\*\*\*</sup>HIPAA changes and a high volume of claims submitted made the average processing days higher than normal

<sup>\*\*\*\*\*</sup> Higher than normal claim average resulting from a clean up of aged medical review claims

## WISCONSIN HEALTH INSURANCE RISK SHARING PLAN HIRSP MONTH END CLAIMS INVENTORY

Claim Type/ Description	Number of clair	ns to be keyed	Claims in the system being processed (includes claims waiting to be keyed)		
	Total	Over 30 days old	Total	Over 30 days old	
August 2003 - All Claim Types	2,324	0	5,614	870	
September 2003 - All Claim Types	2,638	0	6,613	1,094	
October 2003 - All Claim Types	6,321	0	10,134	1,554	
November 2003 - All Claim Types	5,195	0	9,044	1,229	
December 2003 - All Claim Types	11,177	0	14,939	1,508	
January 2004 - All Claim Types	9,242	0	13,832	1,837	
February 2004 - All Claim Types	3,163	0	8,050	2,046	
March 2004 - All Claim Types	3,502	0	8,156	1,910	
April 2004 - All Claim Types	4,429	0	9,582	2,378	
May 2004 - All Claim Types	5,387	0	9,401	1,427	
June 2004 - All Claim Types	355	0	4,886	1,435	
July 2004 - All Claim Types	4,580	0	8,099	1,198	
August 2004 - All Claim Types	7,765	0	10,827	989	

### July 2004

	Claim Type / Description	Number of cla	ims to be keyed	Claims in the system being processed (includes clair waiting to be keyed)		
<i>,</i> ,		Total	Over 30 days old	Total	Over 30 days old	
CT10	Pharmacy (Non-PBM)	0	0	0	0	
CT19	Pharmacy Adjustments (Non-PBM)	0	0	0	0	
CT20	Physicians	3,602	0	5,607	913	
CT23	Outpatient Hospital	135	0	818	139	
CT24	Miscellaneous	107	0	379	36	
CT30	Professional Crossovers	522	0	836	67	
CT31	Outpatient Crossovers	196	0	256	10	
CT39	Professional Adjustments	0	0	83	16	
CT40	Inpatient Hospital	11	0	99	15	
CT41	Nursing Home	2	0	6	0	
CT49	Inpatient Hospital Adjustments	0	0	0	0	
CT50	Inpatient Hospital Crossovers	3	0	13	2	
CT51	Nursing Home Crossovers	2	0	2	0	
CT59	Nursing Home Adjustments	0	0	0	0	
All Claim	Types	4,580	0	8,099	1,198	

#### August 2004

	Claim Type / Description	Number of cl	aims to be keyed	Claims in the system being processed (includes claims waiting to be keyed)		
		Total	Over 30 days old	Total	Over 30 days old	
CT10	Pharmacy (Non-PBM)	0	0	0	0	
CT19	Pharmacy Adjustments (Non-PBM)	0	0	0	0	
CT20	Physicians	5,162	0	6,991	754	
CT23	Outpatient Hospital	534	0	983	103	
CT24	Miscellaneous	283	0	617	21	
CT30	Professional Crossovers	1403	0	1587	80	
CT31	Outpatient Crossovers	320	0	422	11	
CT39	Professional Adjustments	0	0	82	10	
CT40	Inpatient Hospital	63	0	128	9	
CT41	Nursing Home	0	0	7	0	
CT49	Inpatient Hospital Adjustments	0	0	1	0	
CT50	Inpatient Hospital Crossovers	0	0	8	1	
CT51	Nursing Home Crossovers	0	0	1	0	
CT59	Nursing Home Adjustments	0	0	0	0	
All Claim	Types	7,765	0	10,827	989	

## Claims Denied Report\* August 2004

	Pla	n 1A	Plan 1B		Plan 2		All Plans			
Processing Month	Paid	Denied	Paid	Denied	Paid	Denied	Paid	Denied	Total Processed	Denial Rate
August 2003							25,534	10,983	36,517	30.1%
September 2003							20,675	7,731	28,406	27.2%
October 2003							15,903	20,036	35,939	*** 55.8%
November 2003							21,860	16,651	38,511	43.2%
December 2003							21,873	13,878	35,751	38.8%
January 2004							31,974	18,250	50,224	36.3%
February 2004							28,482	15,854	44,336	35.8%
March 2004	12,937	6,049	7,139	3,671	4,094	2,420	24,170	12,140	36,310	33.4%
April 2004	16,145	6,557	9,583	4,109	5,364	2,833	31,092	13,499	44,591	30.3%
May 2004	13,862	5,916	8,378	3,787	4,326	2,234	26,566	11,937	38,503	31.0%
June 2004	14,320	5,412	8,906	3,554	4,796	2,041	28,022	11,007	39,029	28.2%
July 2004	14,539	5,511	9,098	3,723	4,916	2,340	28,553	11,574	40,127	28.8%
August 2004	11,258	4,409	7,199	3,018	3,743	1,643	22,200	9,070	31,270	29.0%

<sup>\*</sup>Claims denied by the PBM are not included. See page 30 for claims denied by the PBM. Detailed paid versus denied claims reporting began in March 2004.

#### August 2004 - Denial Reason Detail\*\*

Top R	Volume	
380	Pre-ex	2,647
187	Lack of medical necessity	2,301
A97	Claim indicator missing or invalid	1,725
A22	Billing provider number invalid or incorrect	1,483
401	Duplicate Claim - Professional	1,381
172	Policyholder not eligible for date of service	1,070
A02	Policyholder number not on file	1,050
152	Billing provider certification not valid for date of service	467
177	Invalid place of service	420
183	Provider type not valid for procedure billed	372
246	Procedure requires a modifier	319
192	Procedure requires prior authorization	285
171	Late Billing	247

<sup>\*\*</sup>Denial codes apply to individual service details. Claims may have more than one service detail; therefore, the number of denials shown here represents the number of denied service details, not the number of denied claims.

<sup>\*\*\*</sup>Denied claims increased due to HIPAA changes. Providers were not following HIPAA billing instructions.

<sup>\*\*\*\*</sup>The report that was used to gather the detail denial information was found to be inaccurate in the individual edit counts. The data for June 2004 was derived though a different report that has been verified to be accurate. A data correction to the detail denial data for the months of October 2003 through May 2004 will be produced. Note that the report used to gather this data was not used for any other purpose than to determine exact detail denial reasons. No other claim statistics were affected by the previously used report, including total number of claims paid and denied, nor were any operational functions affected by the old report, including claim payment.

## WISCONSIN HEALTH INSURANCE RISK SHARING PLAN PHARMACY CLAIMS DENIED BY PBM

## Claims Denied Report August 2004

Sep-03	7,427
Oct-03	11,825
Nov-03	7,951
Dec-03	8,271
Jan-04	8,470
Feb-04	8,354
Mar-04	13,260
Apr-04	9,383
May-04	7,614
Jun-04	8,148
Jul-04	8,570
Aug-04	8,297

## August 2004 - Reason Detail

* Top Reasons for Denial	Volume
47 - Early refill	2,654
35 - Prior Authorization required	1,252
74 - Drug Utilization Review	1,160
29 - Invalid/excessive days supply	1,058
05 - Non-covered prescription item	588
03 - Date filled beyond cancel / ID card expired	405
04 - Duplicate claim	226
22 - Non legend items not covered	217
07 - Invalid/Excessive Quantity	155
27 - Invalid/Missing Patient Birthdate	121

<sup>\*</sup>In the PBM environment, each prescription processed is counted as one claim.

## Claims Accuracy Performance\* August 2004

		CLAIM	PAYMENTS	CORRECT	ACCURACY
MONTH	CLAIMS	<b>PAYMENTS</b>	REVIEWED	<b>PAYMENT</b>	RATE
Sep-03	28,439	\$4,246,421	\$53,689	\$53,663	99.95%
Oct-03	35,942	\$3,517,547	\$66,842	\$70,368	**94.67%
Nov-03	38,514	\$3,779,227	\$123,352	\$122,765	99.52%
Dec-03	35,756	\$4,781,794	\$133,185	\$133,192	99.99%
Jan-04	50,224	\$5,313,619	\$60,565	\$60,379	99.69%
Feb-04	44,336	\$5,635,317	\$74,158	\$73,901	99.65%
Mar-04	35,840	\$5,549,043	\$78,006	\$78,006	100.00%
Apr-04	44,591	\$6,948,734	\$51,662	\$51,662	100.00%
May-04	38,503	\$6,050,073	\$64,896	\$64,833	99.90%
Jun-04	39,029	\$5,640,805	\$49,747	\$49,826	99.84%
Jul-04	40,127	\$7,059,137	\$80,036	\$80,036	100.00%
Aug-04	31,270	\$5,264,531	\$49,875	\$49,875	100.00%

<sup>\*</sup> Claims processed through PBM are not included in the performance statistics.

<sup>\*\*</sup>Claim payment accuracy is lower than normal due to a keying error on one inpatient claim.

#### WISCONSIN HEALTH INSURANCE RISK SHARING PLAN APPEALS AND GRIEVANCE SUMMARY August, 2004

#### **CLAIM APPEALS**

TOTAL CLAIM APPEALS RECEIVED	68
REINSTATEMENTS	23
COVERAGE DENIED	12
BACK DATE SUBSIDIES	2
PA DENIAL	10
MEDICAL NECESSITY	1
PRE-X CLAIM DENIAL	10
WAIVE PRE-X	7
LATE BILLING	2
OUT-OF-STATE NONCERT PROVIDER	1
OTHER	0
TOTAL CLAIMS/REINSTATEMENTS CLOSED	73
CLAIM APPEALS AVERAGE NUMBER OF DAYS	4.45
GRIEVANCES	
GRIEVANCE COMMITTEE REVIEW:	
REQUEST FOR SUBSIDY REDUCTION DENIALS	2
REQUEST TO BACKDATE POLICY CANCELLATION	1
REQUEST TO WAIVE PRE-X	1
REQUEST FOR BENEFITS FROM NONCERTIFIED PROVIDER	1
REQUEST FOR LATE BILLING OVERRIDE	4
REQUEST FOR MEDICAL NECESSITY	2
REQUEST TO PAY PRE-X DENIALS	1
REQUEST FOR BACKDATE SUBSIDY	1
* DEFERRED TO NEXT MONTH (SEPTEMBER)	0